

Please type a plus sign (+) inside this box →



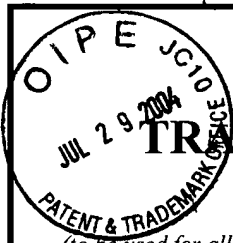
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PTO/SB/21 (6-99)

Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

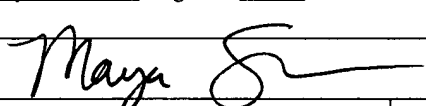
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 TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/426,792	
	Filing Date	October 22, 1999	
	First Named Inventor	Dennis T. Mangano	
	Group/Art Unit	1614	
	Confirmation No.	1783	
	Examiner Name	SPIVACK, Phyllis	
Total Number of Pages in This Submission		Attorney Docket Number	27116-701.301

ENCLOSURES (check all that apply)

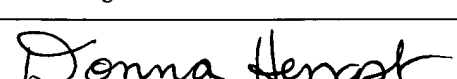
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response To Restriction Requirement <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration For Utility or Design Application <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney and Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Sequence Listing/Diskette <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks The Commissioner is hereby authorized to charge and credit deposit account 23-1415 (Attorney Docket No. 27116-701.301) for any charge of credit, overpayment, or any additional fees required.		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name	Maya Skutabch, Reg. No. 52,505 WILSON SONSINI GOODRICH & ROSATI		
Signature			
Date	July 29, 2004	Customer Number:	021971

CERTIFICATE OF EXPRESS MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated below and addressed to: M/S Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: July 29, 2004. EV 517773793 US

Typed or printed name	Donna Hengst		
Signature		Date	July 29, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEE TRANSMITTAL**for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete if Known

<input type="checkbox"/> applicant claims small entity status. See 37 CFR 1.171.		Application Number	09/426,792
		Filing Date	October 22, 1999
		First Named Inventor	Dennis T. Mangano
		Examiner Name	SPIVACK, Phyllis G.
		Art Unit	1651
		Attorney Docket No.	27116-701.301
TOTAL AMOUNT OF PAYMENT		(\$) 1,005.00	

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:

Deposit

Account Number

23-2415

Deposit

Account Name

Wilson Sonsini Goodrich & Rosati

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment fee(s)☒ Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee	Entity Fee	Small Fee	Entity Fee	Fee Description	Fee Paid
Code	(\$)	Code	(\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims			
Independent Claims			
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee (\$)	
1202	18	2202 9 Claims in excess of 20
1201	86	2201 43 Independent claims in excess of 3
1203	290	2203 145 Multiple dependent claim, if not paid
1204	86	2204 43 **Reissue independent claims over original patent
1205	18	2205 9 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)

**or number previously paid, if greater; For Reissues, see below

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large	Entity	Small	Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	1,005
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)


* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$1,005.00

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Maya Skubatch	Registration No. (Attorney/Agent)	52,505	Telephone	650-493-9300
Signature		Date	July 29, 2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT
Attorney Docket No.: 27116-701.301

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) Confirmation No. 2354
)
Dennis T. Mangano) Group Art Unit: 1614
)
Application No.: 09/426,792) Examiner: SPIVACK, P.G.
)
Filed: October 22, 1999) Customer No. 021971
)
For: Methods For Reducing Mortality And)
Morbidity By Postoperative Administration of A)
<u>Pharmacologic Cardiovascular Agent</u>)

RESPONSE TO RESTRICTION REQUIREMENT

M/S Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Introductory Comments:

In response to Restriction Requirement mailed on January 29, 2004, Applicants elect to prosecute the Group I. This response is being submitted on July 29, 2004, the extended due date. The fee of \$1,005.00 (small entity) for five (5) months extension of time is submitted herewith on the attached Form PTO/SB/17.

Applicant reserves the right to pursue the non-elected subject matter in one or more later filed divisional, continuation, or continuation-in-part applications.

Application No. 09/426,792
Restriction Reply date July 29, 2004
Reply to Office Action of January 29, 2004

Applicant believes that the claims of the instant application meet all of the conditions for patentability and are in condition of allowance. Accordingly, an early indication of the same is respectfully requested.

The Commissioner is hereby authorized to charge any additional fees that may be required, or credit any overpayment to Deposit Account No. 23-2415 (Attorney Docket No. 27116-701.301).

Respectfully submitted,

WILSON SONSINI GOODRICH & ROSATI

Date: July 29, 2004

By:



Maya Skubatch, Reg. No. 52,505

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